



BOARD OF HEALTH MEETING MINUTES
Tuesday, July 23, 2019

BOARD MEMBERS:

Georgia Hanigan, Commissioner, Payette County
Nate Marvin, Commissioner, Washington County (Excused)
Tom Dale, Commissioner, Canyon County (Excused)
Kelly Aberasturi, Commissioner, Owyhee County
Viki Purdy, Commissioner, Adams County
Sam Summers, MD, Physician Representative
Bryan Elliott, Commissioner, Gem County

STAFF MEMBERS:

Nikole Zogg, Doug Doney, Patty Foster, Katrina Williams, Carol Julius, Mitch Kiester, Clay Roscoe,
Jami Delmore, Ana Vidales, Claudia Ornelas, Cristina Froude

GUESTS: Brian Reese, Department of Environmental Quality; Alexis Pickering, Central District Health/Southwest District Health; Jimmy Church

MEETING CALLED TO ORDER -- CHAIR

Chairman Bryan Elliott called the business meeting to order at 9:02 a.m.

REQUEST FOR ADDITIONAL AGENDA ITEMS

Chairman Bryan Elliott asked for additional agenda items. No additions to the agenda were noted.

PLEDGE OF ALLEGIANCE

Meeting attendees participated in the Pledge of Allegiance.

PUBLIC COMMENT

No members of the public were present for the comment period.

NEW EMPLOYEE ANNOUNCEMENTS

Division administrators introduced new employees.

REVIEW AND APPROVAL OF JUNE BOARD OF HEALTH MINUTES

Board members reviewed meeting minutes from the meeting held June 25, 2019.

MOTION: Dr. Summers moved to approve the June 25, 2019 meeting minutes as presented.

Commissioner Aberasturi seconded the motion. Motion passed unanimously.

REVENUE AND EXPENDITURE REPORT:

Patty Foster presented the June 2019 financial report. The target for revenues and expenditures was 100% at the end of the fiscal year. Expenditures exceeded revenues for the month of June by \$16,000. The Millennium Fund has been expended to a zero balance and there are carryover funds for the Parents as Teachers (PAT) program in the amount of \$494,800. Southwest District Health ended fiscal year 2019 with \$438,265 in the black. Patty will provide information about this year-end balance in the year-end report.

FISCAL YEAR 2019 END OF YEAR REPORT

Patty Foster presented the Fiscal Year 2019 End of Year Report. Patty compared the original budget and the revised budgets and the actual revenues and expenditures. The actual revenues were \$10,211,656 with actual expenditures of \$8,867,970 for an ending balance of \$1,343,000. Several adjustments were made toward that ending balance including contracting accruals that include balances outstanding with Idaho Department of Health and Welfare (IDHW). The ending balance also reflects carryover funds for the Behavioral Health Board totaling \$29,000

Patty explained that the unusually high ending cash balance is due in part to an unexpected benefit holiday. This break from employee health premiums amounted to \$268,000. Part of this balance was moved over to personnel with board approval. The other piece of the ending cash balance is \$159,977 that was budgeted to capital outlay. When it became apparent funds would be needed to repair the Caldwell facility's siding, Patty backed off of some of the capital expenditures for all of the SWDH buildings to set money aside to address the siding issue.

FISCAL YEAR-END CASH TRANSFER RECOMMENDATIONS

Patty recommended leaving the remaining cash balance in the interest bearing operating account to pay for the stucco siding repair when the project is complete. This operating account draws the same interest as the capital outlay account with the difference being board approval is required to move funds from capital. Patty has discretion to spend funds when needed from the operating account without board approval.

MOTION: Dr. Summers made a motion to leave the cash balance of \$466,706 in the LGIP (Local Government Investment Pool) to be used for the Caldwell building stucco siding repairs. Commissioner Hanigan seconded the motion. Motion passed unanimously.

INTRODUCTION TO WESTERN IDAHO COMMUNITY HEALTH COLLABORATIVE (WICHHC)

Alexis Pickering, WICHHC Health Strategist, introduced herself to Board members, explained her background and previous work at Central District Health (CDH) as a health policy analyst, and provided information on the WICHHC.

The WICHHC serves the 10 counties represented by CDH and SWDH and will include 21 diverse members. The collaborative received funding from sources including Blue Cross of Idaho Foundation, PacificSource, St. Luke's, Saint Alphonsus, and the Idaho State Legislature to look at an innovative model to address health issues across these counties. One of WICHHC's key functions is to serve as a convener of urban and rural cross-sector partners. Other functions include: data collection, collaboration to support healthcare transformation, serving as a source of information and developing initiatives.

Some of the next steps are to review WICHHC member nominations and select members, finalize the charter, pursue grant funding opportunities, present a legislative budget request, and identify quick wins.

Board members discussed the progress of the Statewide Health Innovation Program (SHIP) which was geared toward healthcare. Alexis explained the differences between the Healthcare Transformation Council of Idaho (HTCI) and WICHHC. The HTCI is a statewide group focused on healthcare transformation. The council's first priority is to support Idaho's health insurance companies and healthcare providers in their transition from fee-for-service to value-based contracting. The WICHHC is focused on improving community health and will be identifying top priorities for the 10-county region before the end of December. These two groups are independent of one another, but will intersect and work together collaboratively. Progress cannot be made without payers and healthcare systems being at the table. Creating better health outcomes and investing in community health will benefit the payers and healthcare systems in the long run.

Nikki pointed out some beneficial aspects of the community health focused collaborative. For example, one of the first things our regional collaborative did was complete a community health needs assessment to identify big issues. Youth behavioral health and mental health was one issue identified. As a result of the topics identified, stakeholders were pulled together to address the specific issues and a project was piloted to elementary and middle schools to provide onsite counseling at schools. This pilot program has benefited youth in schools and has shown decreased disruptions in the classroom, decreased absenteeism and improved academic performance.

STUCCO REPAIR STRUCTURAL ENGINEER UPDATE

Jimmy Church, structural engineer, is assessing the stucco issues with the SWDH Caldwell facility. Vertical cracks adjacent to the reveals have opened wide enough to not be ignored. The extent of the cracks could allow moisture to enter and cause problems. He understands that board members prefer to remove the stucco. He explained that repair is likely not possible and that there are three options:

1. Install metal siding over the broken stucco
2. Remove stucco and install metal over the sheetrock, and
3. Remove all the stucco and the sheetrock and put an OSB sheathing then metal siding on. The option to remove stucco and sheetrock and wrap the building is probably the most worry-free method. The new siding cannot be attached just to the stucco but must get into the steel studs.

Jimmy will provide his complete report when reviews are completed. Doug asked board members for direction so he can begin to seek contractors. Board members directed Doug to pursue the option of removing the stucco and sheetrock, wrapping the building, and reapplying the metal siding.

Board members discussed using an architect to assist with the bid process and plan reviews. LCA did some work for Gem County. LCA was chosen because of their track record with bigger projects. The structural engineer can come up with some recommendations for architects. Involving an architect will require that Requests for Proposals be issued for services for the architectural planning of the destruction and construction.

SPECIAL PRESENTATION: ADOLESCENT PREGNANCY PREVENTION

Ana Vidales, SWDH health educator, provided a brief overview of the four programs offered at SWDH including Draw the Line/Respect the Line, Reducing the Risk, Wise Guys, and Cuidate. Ana emphasized that Cuidate, the newest grant received, is focused toward Hispanic students and addresses Hispanic cultural barriers and norms.

All of the programs offered through SWDH are abstinence-based due to zero risk for pregnancy prevention and sexually transmitted disease (STD) avoidance. All of the birth control methods presented include a small percentage of possibility for failure. Curriculums include topics such as seeking an adult ally, healthy relationships, positive youth development and building communication skills between youth and families.

Reducing the Risk has been implemented for about seven years and Ana has taught it for about 4 ½ years. Wise Guys is a male-focused curriculum reaching about 80 males and is currently taught at COSSA in Wilder and the Idaho Department of Juvenile Correction Center (IDJC) in Nampa. Draw the Line/Respect the Line is geared toward younger students and we are currently recruiting schools to participate. Cuidate will focus on Latino youth in Gem, Payette, and Washington counties.

The topic of sexual health education is a controversial topic but has surfaced in Community Health Needs Assessments (CHNA) in Gem and Washington counties, in the Gem and Washington Community Health Action Team (CHAT) meetings, and in youth behavioral health surveys. The Adams County ethnography report also identified the need for sexual health education in the community.

Ana discussed the expansion of the sexual health programs. She is looking for opportunities to expand the programs into other communities and counties that she has not been in. Ana asked board members to consider reaching out to school administration and community leaders to help seek support for expanding these programs.

There has been a recent legislative push to entirely remove sexual health education curriculum from schools. Ana explained that conversations on these topics between parents and children can be difficult. The Families Talking Together (FTT) program that SWDH offers is designed to help families with these conversations by providing tips on how to initiate the conversations and teaching motivational interviewing skills.

HEALTH EDUCATION IN SCHOOLS

Nikki explained the recent push to limit or remove sexual health education in schools. The health district feels reaching students with this topic is important whether that is at schools or other venues. She asked board members for guidance so that if this becomes a legislative issue again as it sounds like it will that SWDH can proceed as the board members see fit.

Mitch Kiester added that the sexual health education program has grown but now stagnancy is happening due to schools' unwillingness to allow the curriculum. Mitch and Ana asked board members to lend support to bringing the curriculum to the schools by encouraging superintendents and school administrators to explore the curriculum and its benefits.

Board members discussed the opt-in legislation and the importance of the school boards having the opportunity to review the curriculum. Ana explained that Vallivue Academy, Wilder, and the Corrections Center in Nampa require school board approval. For example, with Vallivue School District, a Memorandum Of Understanding (MOU) explaining which topics would be taught and which curriculum will be presented is provided. The school board approves the MOU and brings back any changes or suggestions to the curriculum. Ana also conducts an exit interview to gather information and suggestions.

Nikki continued the conversation regarding the opt-in language that was being considered by the 2019 legislature and mentioned the health districts' concern about the potential for low percentage of opt-in forms being returned with parent signature. Getting parent consent forms back sometimes is difficult. Board members discussed the option of an opt-out form to give parents with concerns about the curriculum the opportunity to do what they feel is appropriate for their student.

Ana explained that currently all of the schools where SWDH provides sexual health education use opt-out forms. Forms are sent home and parents have two weeks to review it and send the form back to the home room teacher.

Board members also discussed the importance of presenting the actual cost of unintended pregnancies to the legislature. The legislature understands costs and is also conscious of not infringing on parent rights. Commissioner Elliott asked if SWDH has data or statistics on the actual lifetime cost of these pregnancies as well as the statistics showing how many teen moms have multiple pregnancies.

Board members do not have complete agreement on opt-in versus opt out. Nikki will work to ensure SWDH takes a neutral position on that issue.

HARMFUL ALGAL BLOOMS (HAB) OVERVIEW

Brian Reese, Water Quality Standards Analyst, Idaho Department of Environmental Quality (DEQ), provided an overview of harmful algal blooms (HABs). Cyanobacteria, also known as blue green algae, occur naturally. When temperatures rise, their populations can "bloom," and toxic chemical compounds, cyanotoxins, can be released into the water. Brian discussed the potential health impacts. He said the most important thing right now is to encourage people who come into contact with recreational water is to

wash their hands, discard the skin and filet the fish. The toxins create a threat to pets who may enter water with toxins and ingest the water directly or by licking their fur.

Brian explained that DEQ relies on citizen reports to help identify areas that may be affected by the blooms. Cyanobacteria blooms may look like streaks of paint, globs of scum, or thick green mats along lake shorelines. A bloom may be shades of green, blue, or even white or red.

CRISIS CENTER UPDATE

Cristina Froude provided an update on the Western Idaho Community Crisis Center (WICCC). The center has been operational since April 23, 2019. She distributed the outreach plan for the center and noted the most significant holdback is the stigma of receiving treatment. She explained the development of a new goal to reduce stigma by educating communities about behavioral health issues. This goal will be added to the outreach plan. Ethnography work and marketing analysis has been worked on in cooperation with the Blue Cross of Idaho Foundation.

For the months of May and June, crisis center statistics show that 135 services have been provided. Some duplication is involved in these numbers when clients revisit. Those clients being seen are primarily from Canyon County. An additional data point for where the clients would be if the crisis center resource was not available will be added to help determine a dollar value on the services.

CRISIS CENTER ADVISORY COMMITTEE COUNTY COMMISSIONER APPOINTMENT

Nikki explained that the statute for the advisory committee composition requires a county commissioner for the Region sit on that committee. This committee is currently being developed. Commissioner Aberasturi expressed interest in serving on the committee.

MOTION: Chairman Elliott made a motion to nominate Commissioner Aberasturi as the county commissioner representative to sit on the WICCC advisory committee. Commissioner Hanigan seconded the motion. Motion passed unanimously.

DIRECTOR'S REPORT

Elected Officials Meeting Input

Southwest District Health hopes to host another elected officials health education forum. Nikki asked for input from board members on topics that would be valuable or if there is another format that they would like to see. A few topics already identified are Medicaid expansion and its impact on the District, the Western Idaho Community Crisis Center, the Western Idaho Community Health Collaborative, sexual health education in the schools, and immunization requirements.

The forum will target elected officials that include state representatives, local government, county commissioners, and others within our district.

Behavioral Health Board Update

The Region 3 Behavioral Health Board (BHB) contract is in the process of being renewed following its initial four-year term expiration. Idaho Department of Health and Welfare (IDHW) has been seeking input from the BHB regarding any change in scope of work and contract deliverables. The board leadership does not request any significant changes at this time. Grant support is one thing the BHB would like assistance with as the BHB seeks to pursue more opportunities for funding. How the BHB decides to pursue funding may impact SWDH, and we are working to revise the memorandum of understanding between SWDH and the BHB to ensure there are clear shared expectations.

Healthcare Transformation Council of Idaho

Nikki provided a brief update. The Council is working to prepare the direction they will be heading and their legislative request for ongoing support through the next year. One area of focus is increasing the

number of value based payments or payment arrangements from 20% to 50% by 2023. The payers' workgroup which existed under the Statewide Healthcare Innovation Plan (SHIP) grant has been reconvened. Another priority issue is including quality metric alignment helping ensure providers meet the quality measures and are not overburdened with different quality measures from each health insurance payer contract.

Dr. Summers explained that different metrics between the payers exist. Another matter discussed at the last meeting is telehealth. Members feel value based contracting would allow telehealth to happen without having to deal with the reimbursement barriers that currently exist.

Governor's CEC Update

Nikki prepared a draft letter in response to the letter the public health directors received from the Governor's office. The other six public health directors and their boards have an interest in sending a single response on behalf of the Idaho Association of Local Boards of Health. The written response addresses the Governor's recent letter notifying health districts that the Governor will determine director pay increases without consideration given to their boards' preference. Nikki will wait to send the letter the current Executive Council President until all of the boards have had an opportunity to meet and take a position on the letter.

FMRI Partnership

Family Medicine Residency of Idaho (FMRI) has signed an agreement for SWDH to serve as a community partner to allow a community health rotation for residents. A first year resident will be assigned to SWDH each year for a three-year rotation. The residents will work alongside SWDH staff, and may see patients, conduct home visits or lead special projects or public health research.

Health Insurance Premium Notice

A notice from the state was recently issued to notify health districts that the annual insurance premiums will increase by approximately \$2,200 per employee, which will represent a significant increase in personnel costs in the fiscal year 2021 budget.

There being no further business, the meeting adjourned at 12:18 p.m.

Respectfully submitted:



Nikole Zogg
Secretary to the Board

Approved as written:



Bryan Elliott
Chairman

Dated: August 27, 2019